

89233

August-24-12 11:26:22 AM

N900040100

Setup Start *NS1*

Stop *NS2*

Start Date: 8/21/12 **Start Qty:** 1.00 ***1***

Cust Item ID:

Required Date: 8/21/12 **Req'd Qty:** 1.00 *** 1 ***

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 12/08/28 Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: ____/____/____ SPC (Y/N): _____ Date: _____

Stop *NR2*

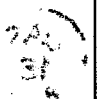
[illegible]

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 89233

89233

Page 2

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Item ID: D412-760-015 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Cabin Floor Protector
 Start Date: 8/21/12 Start Qty: 1.00 *1* Cust Item ID:
 Required Date: 8/21/12 Req'd Qty: 1.00 *1* Customer:
 Reference:

Approvals: Process Plan: Date: Tooling: Date: Run Start *NR1*
 QC: Date: SPC (Y/N): Date: Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Packaging	0.00							
130									
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D412-760-015								
	Location: _____								
	PPP Rev: _____								
140	QC21- Final Inspection - Work Order Release	0.00							
140									
QC	Memo	0.00							
Quality Control									

12/8/31

CK 12/8/31

MR 12-08-31

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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Other <input type="checkbox"/>											
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Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Picklist Print

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Page 1

Work Order ID: 89233

Parent Item: D412-760-015

Start Date: 8/21/12

Required Date: 8/21/12

Parent Item Name: Cabin Floor Protector

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP rev A 07.07.05 new issue EC
IPP Rev:B 08-08-20 revB as per dwg DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

AN960JD10

Washer

NAS1149D0363J

Purchased

No

110

Each

0.0000

28

28

m122378 SP

AN960JD416

Washer

NAS1149D0463J

Purchased

No

110

Each

29.0000

12

12

m122441 SP

Location

Loc Qty

Loc Code

ST351

29

116289

8

119097

21

D3574-5

Cabin Floor Protector

Manufactured

No

110

Each

0.0000

D3574-6

Cabin Floor Protector

Manufactured

No

110

Each

1.0000

Location

Loc Qty

Loc Code

PKG

1

82516

1

D3575-5

Cabin Floor Protector

Manufactured

No

110

Each

0.0000

D3575-6

Cabin Floor Protector

Manufactured

No

110

Each

0.0000

D3580-1

Joggle Bracket

Manufactured

No

110

Each

83.0000

Location

Loc Qty

Loc Code

ST055

83

78232

39

84618

44

D3628-1

Cupped Washer

Manufactured

No

110

Each

491.0000

Location

Loc Qty

Loc Code

ST058

491

83587

491

14

14

SP 12831

14

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
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Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
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Training <input type="checkbox"/>											
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FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

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Page 2

Work Order ID: 89233

Parent Item: D412-760-015

Parent Item Name: Cabin Floor Protector

Start Date: 8/21/12

Required Date: 8/21/12

Start Qty: 1.00

Required Qty: 1.00

D3628-3
Cupped Washer

Manufactured No

110 Each 176.0000



6
SP

C

Location

Loc Qty

Loc Code

ST072

176

68213

176

MS24694-S100
FLAT HEAD SCREW

Purchased No

110 Each 31.0000



6x
SP

C

Location

Loc Qty

Loc Code

ST289A

4

118840

4

ST290A

27

120422

27

MS24694-S54
Screw

Purchased No

110 Each 6.0000



14x

M122814 13x SP

Location

Loc Qty

Loc Code

ST289A

6

120142

4

120361

1

121524

1

1x

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
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5.0 PARTS LIST

Qty -011	Qty -013	Qty -015	Qty -017	QTY -111	QTY -113	QTY -211	Part Number	Description
X							D412-760-011	CABIN FLOOR PROTECTOR KIT
	X						D412-760-013	CABIN FLOOR PROTECTOR KIT
		X					D412-760-015	CABIN FLOOR PROTECTOR KIT
			X				D412-760-017	CABIN FLOOR PROTECTOR KIT
				X			D412-760-111	AFT CABIN WALL AND PYLON PROTECTOR KIT
					X		D412-760-113	AFT CABIN WALL AND PYLON PROTECTOR KIT
						X	D412-760-211	BAGGAGE COMPARTMENT PROTECTOR KIT
1							D3574-1	CABIN FLOOR PROTECTOR
1							D3574-2	CABIN FLOOR PROTECTOR
	1						D3574-3	CABIN FLOOR PROTECTOR
	1						D3574-4	CABIN FLOOR PROTECTOR
		1					D3574-5	CABIN FLOOR PROTECTOR
		1					D3574-6	CABIN FLOOR PROTECTOR
1							D3575-1	CABIN FLOOR PROTECTOR
1							D3575-2	CABIN FLOOR PROTECTOR
	1						D3575-3	CABIN FLOOR PROTECTOR
	1						D3575-4	CABIN FLOOR PROTECTOR
		1					D3575-5	CABIN FLOOR PROTECTOR
		1					D3575-6	CABIN FLOOR PROTECTOR
			1				D3788-1	CABIN FLOOR PROTECTOR
			1				D3788-2	CABIN FLOOR PROTECTOR
			1				D3788-3	CABIN FLOOR PROTECTOR
			1				D3788-4	CABIN FLOOR PROTECTOR
6	4	6	6				D3580-1	JOGGLE BRACKET
14	40	14	14			36	D3628-1	CUPPED WASHER
6	8	6	6				D3628-3	CUPPED WASHER
						1	D3876-1	RH FORWARD WALL PROTECTOR
						1	D3876-3	FORWARD WALL PROTECTOR
						1	D3876-5	LH WALL PROTECTOR
						1	D3876-7	AFT WALL PROTECTOR
						1	D3876-9	RH AFT WALL PROTECTOR
						1	D3876-11	FLOOR PROTECTOR
						1	D3876-13	DOOR PROTECTOR
				1	1		D3933-1	LH AFT CABIN WALL PROTECTOR
				1	1		D3933-2	RH AFT CABIN WALL PROTECTOR
				1			D3935-1	LH PYLON PROTECTOR
				1			D3935-2	RH PYLON PROTECTOR
					1		D3935-3	LH PYLON PROTECTOR
					1		D3935-4	RH PYLON PROTECTOR
				14	14		D3942-1	ANGLE
				10	10		D3942-3	CLIP
						1	D3952-1	PLACARD
						36	80-004-2-6	INSERT
28		28	28				AN960JD10	WASHER
12		12	12				AN960JD416	WASHER
14		14	14				MS24694S54	SCREW
6		6	6				MS24694S100	SCREW
						36	MS27039-1-04	SCREW
				4	4		MS27039-4-10	SCREW
				6	6		MS27039-4-14	SCREW
				6	6		MS27039-5-08	SCREW
				8	8		MS27039-5-12	SCREW

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Revision: E
 Date: 09.12.02